· 990

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public Inspection

\overline{A}	For the	e 2010 calen	dar year, or tax year be	ginning		, 2010, a	nd ending			, 20			
В	Check if applicable C Name of organization UAW OHIO STATE POLITICAL ACTION								D Employer identification number				
		s change	Doing Business As UAW			31-0934581							
\Box		me change Number and street (or P O box if mail is not delivered to street address) Room/suite							E Telepho	one number			
Ħ		nitial return 1691 WOODLANDS AVE								419-893-4677			
Terminated City or town, state or country, and ZIP + 4													
			MAUMEE OH 43537	•				i,	G Gross r	eceints \$	355,450		
			F Name and address of pr	ncipal officer	(FN LORTZ			_	-	for affiliates? Yes			
ш	Applica		ADDRESS ABOVE		KEN LOKIZ			1	• .				
ADDRESS ABOVE I Tax-exempt status													
) - (Illselt 110) [4947 (a)(1) CI	V 321	-		n number 🕨	,		
7	Websi		Companyation Toward	✓ Association	Other ►	1			1	of legal domicile	OH		
	art l	organization		Association [Other P	L Ye	ear of format	ion Zuuu	M State	or legal domicile	Оп		
		Summa		1							-		
	1		scribe the organization		-			EEC AND TI	ICID FAR		TIVELY		
ė			E, SEGREGATED FUN				LIMPLOY	EES AND 11	TEIR FAN	MILIES COLLEC	IIVELY		
ă	ł	MAKEEX	PENDITURES TO INFL	JENCE THE O	UTCOME OF EL	ECTIONS				••••			
ᇤ													
Governance	2		s box 🕨 🗌 if the organiz				e than 25% c	of its net assets					
<u>ග</u> නේ	3	Number o	of voting members of t	he governing	body (Part VI,	lıne 1a) . .	•	-	3		2		
Activities &	4	Number o	of independent voting	members of	the governing b	oody (Part VI	, line 1b)	•	4		2		
ŧ	5	Total num	nber of individuals emp	oloyed in cale	endar year 201	0 (Part V, line	e 2a)		5		0		
Ċ	6	Total num	nber of volunteers (est	mate if nece	ssary)				6		0		
٩	7a	Total unre	elated business reveni	ie from Part '	VIII, column (C)	, line 12			7a		0		
	b	Net unrela	ated business taxable	income from	Form 990-T, I	ne 34 .			7b		0		
								Prior Ye	ar	Current Ye	ear		
es.	8 Contributions and grants (Part VIII, line 1h)										350,000		
Ž	9		service revenue (Part			•	[0		
Revenue	10	-		= -	es 3. 4. and 7d)					404		
ď	11	Investment income (Part VIII, column (A), lines 3, 4, and 7d)Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)					_				5,450		
	12		enue—add lines 8 throi				ne 12)				355,854		
_	13		nd sımılar amounts pa										
	14	Benefits r	oald to or for member	(Part R For	Man My ime-4	, , , , , , , , , , , , , , , , , , ,					0		
	4 =	Salaries	other compensation, er	5-10)				0					
Expenses	16a	Drofossio	nal fundraising fees (F	Selly calum	$a_{\rm c}(\Lambda)$ line 110		° '°'				0		
ē	l loa		Professional fundraising fees (Part X, column (A), line 11e) of otal fundraising expenses (Part X, column (B), line (B)								1999/24		
Ä	b					16 N i.	492,683						
	''		penses (Part IX, colum				_,						
	18		enses Add lines 13-			nn (A), line 2:	^{o)} -		<u> </u>		492,683		
_	19	Hevenue	less expenses Subtra	ct line 18 fro	m line le Z			eginning of Cu	was Vanu	End of Ye	(136,829)		
Sor	<u> </u>							eginning of Cu		Endoire			
sset	20		ets (Part X, line 16)	_			_	-	223,373	-	86,544		
Net Assets	21		ılıtıes (Part X, line 26)	. ()			·		0		0		
_			ts or fund balances S	ubfract line 2	1 from line 20				223,373		86,544		
_	art II	- 187	ure Block	$\alpha V \setminus$									
		nalties of persui	ry I declare that I have exam	nded this return	including accomp er) is based on all ir	anying schedule	s and staten	nents, and to t	he best of	my knowledge and	belief, it is		
-tr	ue, corre	ect, and comple	east montained of preparer	other than office	er) is based on all ir		ich preparer	mas any know	771	111 7017			
			10.	/)					V 2	M VOIS	'		
	gn	NAT S	ature of officer	NIC No	11416			Da	ite •				
H	ere	111	HKL H IM GIN	MIS, CO	<u> </u>								
		Туре	or print name and title	•									
D	aid	Print/Ty	pe preparer's name	Prep	arer's signature		Da	te	Check	☐ if PTIN	_		
	aiu repar	or							self-em				
	•	1	iame ►				•	Firn	n's EIN ▶				
U	se Or	y	iddress ▶						one no				
M	ay the		s this return with the p	reparer shov	vn above? (see	instructions)			. DY	es 🗌 No		

For Paperwork Reduction Act Notice, see the separate instructions.

יכ כי וווונ	0 (2010			- age =
art	Ш	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III	<u>.</u>	
1	Brief	ly describe the organization's mission.		
		ARATE, SEGREGATED FUND THROUGH WHICH THOUSANDS OF UAW MEMBERS AND THEIR FAMILIES COLLE	CTIVELY	
	MAK	E EXPENDITURES TO INFLUENCE THE OUTCOME OF ELECTIONS		
2	Did t	the organization undertake any significant program services during the year which were not listed on the		
_		Form 990 or 990-EZ?	☐ Yes	✓ No
		es," describe these new services on Schedule O		
3		the organization cease conducting, or make significant changes in how it conducts, any program	- 7	
		ices?	☐ Yes	☑ No
		es," describe these changes on Schedule O. cribe the exempt purpose achievements for each of the organization's three largest program services by ex	rnenses	Section
4	5016	c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants a	nd alloca	tions to
	othe	rs, the total expenses, and revenue, if any, for each program service reported.		
4a	(Coc	de:) (Expenses \$ 492,683 including grants of \$ 0) (Revenue \$	350,000	
	SEP	ARATE, SEGREGATED FUND THROUGH WHICH THOUSANDS OF UAW MEMBERS AND THEIR FAMILIES COLLI	ECTIVELY	,
	MAH	(E EXPENDITURES TO INFLUENCE THE OUTCOME OF ELECTIONS		
			·	
4b	(Coc	de) (Expenses \$including grants of \$) (Revenue \$		_)
			. 	
4c	(Coc	de) (Expenses \$including grants of \$) (Revenue \$)
4d	Othe	er program services (Describe in Schedule O)		
, u		enses \$ including grants of \$) (Revenue \$)		
4e		al program service expenses ► 402,683		

Incitation Circulist of Deutified Schedules	Part IV	Checklist of Required Schedules
---------------------------------------------	---------	---------------------------------

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		1
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2		1
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	√	•
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," <i>complete Schedule C, Part II</i> .	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		√
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		√
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III			
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		√
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		√
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		✓
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		√
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		✓
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		✓
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		√
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		✓
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		✓
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		✓
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		✓
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		✓
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		✓
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		✓
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		√
20 a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		✓
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		1
			000	

Part	Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		✓
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		√
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated			
04-	employees? If "Yes," complete Schedule J	23		✓
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25	24a		✓
р	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year	24b		✓
	to defease any tax-exempt bonds?	24c		✓
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		✓
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		_
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	2000	√
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		√
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		✓
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		√
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		√
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		<u>·</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u>·</u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		<u> </u>
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		`
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2.	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30	-+	
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		/
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	1	
			200	

art	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V			
	Officer if deficedic of contains a response to any question in the fact of		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 0	17		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . [1b]0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c_	<u>√</u>	(4500 · 7
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		100	
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0	0 L	2000	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		21 7.5
3a	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		
b	If "Yes," has it filed a Form 990-T for this year? <i>If "No," provide an explanation in Schedule O</i>	3b		Ė.
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		_
ь	If "Yes," enter the name of the foreign country N/A			
_	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	5a		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
b	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		-
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the		_	
	organization solicit any contributions that were not tax deductible?	6a	✓	l
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b	✓	
7	Organizations that may receive deductible contributions under section 170(c).		4	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7с		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f g	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7f		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting		48.2	
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring		į 1	
	organization, have excess business holdings at any time during the year?	8		MANUSCASSION C
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a		
ь 10	Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter	9b		
a	Initiation fees and capital contributions included on Part VIII, line 12 . 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		1	
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	, , , , , , , , , , , , , , , , , , ,	40		1.06
b	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	12a	DEV (HEE)	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			4.7
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	•	
	Note. See the instructions for additional information the organization must report on Schedule O		1111	410
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
С				
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	<u> </u>	4.44
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		<u> </u>

rorm 99	30 (20 10)			ugo 🗢
Part	"No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change. O. See instructions.	selow, ges in	and Sche	edule —
	Check if Schedule O contains a response to any question in this Part VI			✓
Secti	on A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year.	2		
b	Enter the number of voting members included in line 1a, above, who are independent 1b	2		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Market State	√
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		✓
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		✓
6	Does the organization have members or stockholders?	6		✓
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		✓
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		110	
	the year by the following.			
а	The governing body?	8a	√	
ь	Each committee with authority to act on behalf of the governing body?	8b	√	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O			
Socti	on B. Policies (This Section B requests information about policies not required by the Internal Rever	9	-da \	✓
oecu	on B. Folicies (This Section B requests information about policies not required by the internal never	iue Co	Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a	100	
	If "Yes," does the organization have written policies and procedures governing the activities of such	ioa	•	
	chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b	1	
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	<u>,</u>	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	100	•	460.0
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13.	12a		
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done.	12c		
13	Does the organization have a written whistleblower policy?	13		√
14	Does the organization have a written document retention and destruction policy?	14		√
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a		√
b	Other officers or key employees of the organization	15b		√
16-	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)		10	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		√
	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Section	on C. Disclosure	1		
17	List the states with which a copy of this Form 990 is required to be filed ▶ NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3 for public inspection indicate how you make these available. Check all that apply	3)s only) ava	ilable
	Own website Another's website 7 Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict and financial statements available to the public			olicy,
20	State the name, physical address, and telephone number of the person who possesses the books and records	of the		
	organization KIM ADAMS, 1691 WOODLANDS AVE, MAUMEE, OH 43537, (419) 893-4677			

Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated	Employees,
	and Independent Contractors	

Check if Schedule O contains a response to any question in this Part VII.

Section A.	Officers, Directors,	Trustees, Ker	y Employees,	and Highest	: Compensated	Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors; institutional trustees, officers, key employees, highest compensated employees, and former such persons.

Check this box if neither the organization no (A)	r any relate (B)	u org	ai IIZ		on co C)	оттре	nsa	(D)	(E)	, or trustee.
Name and Title	Average	Posit	on le		•	that ap	oly)	Reportable	Reportable	(F) Estimated
Name and The	hours per week (describe hours for related organizations in Schedule O)	Individual tr or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(1) KEN LORTZ	1							0	0	
TREASURER	<u>'</u>	✓						0	U	
(2) JAMES HARRIS	. 1						•	0	o	
SECRETARY-TREASURER		\							o l	
(3)										
(4)										
(5)										
(6)										
(7)										
(8)							_			
(9)				_					.,	<u> </u>
(10)				-						
(11)										
(12)										
(13)										
(14)										
(15)										
(16)										

Name and title Name and title Name and title Name and title title title Name and title title Name and title title Name and title title Name and title	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)								
Nour per veek (Gescribe hours for veek (Gescribe hours for week (Gescribe hours for hours per veek (Gescribe hours for a granutations in Schedule) Section 1 Section 1 Section 2 Section 2 Section 3 Section 3 Section 4 Section 4 Section 4 Section 4 Section 4 Section 6 Section 7 Section 6 Section 6 Section 6 Section 6 Section 6 Section 7 Section 6 Section 7 Section 7 Section 7 Section 7 Section 7 Section 8 Section 8	(F)								
Complete this table for years at the compensation from the organization by Individual size on line 1a; is the sum of reportable compensation from the organization and related organization is 1a; the sum of reportable compensation from the organization and related organization or individual so Did any person listed on line 1a; is the sum of reportable compensation from the organization or received more than \$150,000? If "Yes," complete Schedule J for such person. Complete this table for your five highest compensated independent contractors that received more than \$100.000.									
(17) (18) (19) (20) (21) (22) (23) (24) (25) (26) (27) (28) (28) (29) (29) (20) 1	other compensation from the organization and related organizations								
(29) (21) (22) (23) (24) (25) (26) (27) (28) 1b Sub-total c Total from continuation sheets to Part VII, Section A b 0 0 d Total (add lines 1b and 1c) 2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 reportable compensation from the organization ▶ 0 3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100 compensation from the organization. (A) (8)									
(20) (21) (22) (23) (24) (25) (26) (27) (28) 1b Sub-total c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) 2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 reportable compensation from the organization ▶ 0 3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100 compensation from the organization.									
(21) (22) (23) (24) (25) (26) (27) (28) 1b Sub-total c Total from continuation sheets to Part VII, Section A 1 Total (add lines 1b and 1c) 2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 reportable compensation from the organization ▶ 0 3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a² If "Yes," complete Schedule J for such individual 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100 compensation from the organization. (A) [8]									
(22) (23) (24) (25) (26) (27) (28) 1b Sub-total c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) 2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 reportable compensation from the organization b 3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100 compensation from the organization. (A)									
(23) (24) (25) (26) (27) (28) 1b Sub-total c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) 2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 reportable compensation from the organization ▶ 0 3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100 compensation from the organization.									
(24) (25) (26) (27) (28) 1b Sub-total c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) 2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 reportable compensation from the organization ▶ 0 3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100 compensation from the organization. (A)									
(25) (26) (27) (28) 1b Sub-total c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) 2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 reportable compensation from the organization ▶ 0 3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100 compensation from the organization. (A)									
(26) (27) (28) 1b Sub-total c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) 2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 reportable compensation from the organization ► 0 3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100 compensation from the organization. (A)									
(28) 1b Sub-total c Total from continuation sheets to Part VII, Section A D Total (add lines 1b and 1c) 2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 reportable compensation from the organization ► 0 3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100 compensation from the organization. (A)									
1b Sub-total c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) 2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 reportable compensation from the organization ▶ 0 3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100 compensation from the organization. (A)									
1b Sub-total .									
c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) 2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 reportable compensation from the organization ▶ 0 3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100 compensation from the organization. (A) (B)									
d Total (add lines 1b and 1c) 2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 reportable compensation from the organization ▶ 0 3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100 compensation from the organization. (A)	0 0								
 2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 reportable compensation from the organization ▶ 0 3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100 compensation from the organization. 									
employee on line 1a? If "Yes," complete Schedule J for such individual 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100 compensation from the organization. (A) (B)									
organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individua for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100 compensation from the organization. (A)	Yes No ated 3								
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person. Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100 compensation from the organization. (A) (B)	such								
Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100 compensation from the organization. (A) (B)	idual 4 🗸								
Complete this table for your five highest compensated independent contractors that received more than \$100 compensation from the organization. (A) (B)									
	\$100,000 of								
	(C) Compensation								
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶ 0									

Part	VIII	Statement of Rev	enue					
		2745862			(A) Total revenue	(B) Related or exempt	(C) Unrelated business	(D) Revenue excluded from tax
		er di de la regione de	and the same			function revenue	revenue	under sections 512, 513, or 514
SS	1a	Federated campaigns	. 1a	0			J. P. C. J. L.	April 1 September 1
unt	b	Membership dues	1b	0			1. 3.6 1.3	
15 E		Fundraising events .	1c	0				
gifts, grants lar amounts	d	Related organizations	. 1d	0				
is, g	е	Government grants (con	tributions) 1e	0		S		
to r	f	All other contributions, gi			# 1			
혈송		and similar amounts not inc		350,000	33.5	- 10 m		4 2
Contributions, gifts, grants and other similar amounts	g	Noncash contributions include		0				40
	h	Total. Add lines 1a-1	<u>f.</u>		350,000			ET CONTROL OF THE CON
Program Service Revenue	_			Business Code				28 E N
eve	2a						-	
e.	b							
ايخ	C				 			
n Se	d							
yran	f	All other program sen	VICO POVODIJO			 		
Proç	g	Total. Add lines 2a-2			0		Jacobs St.	32.00
	3	Investment income						
		and other similar amo		•	404	404	}	
	4	Income from investmen	t of tax-exempt b	ond proceeds				
	5	Royalties		<u></u>				
			(ı) Real	(II) Personal	are see that			
	6a	Gross Rents						
	b	Less: rental expenses		<u> </u>				
	C	Rental income or (loss)		<u> </u>				
	d 7a	Net rental income or ((i) Securities	>	1300T14			
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(II) Other				PROPERTY.
	b	Less cost or other basis		 	14-97		A charge to	
	b	and sales expenses					1	
	С	Gain or (loss)						
		Net gain or (loss)		. •				
	_	riot gam or (1000)			C. Secretary	Table 1		and the second second
ne	8a	Gross income from fu	ındraising		147	1000000		
anua		events (not including \$	_		18 Th. 20 SA			
Re		of contributions reporte	ed on line 1c)					
Other R		See Part IV, line 18		a		3		(* * * * * * * * * * * * * * * * * * *
ğ	b	Less direct expenses		b	76-6 TSD-4-1			
	C	Net income or (loss) f	rom fundraising	events . 🕨				
	9a	Gross income from gassee Part IV, line 19 .	-		18 19	State of the state		Karata da
			-	a				resident and the second
	b	Less. direct expenses Net income or (loss) f		tivities >			1.1	area and a second
	10a	Gross sales of in			***			100 TO 100 T
		returns and allowance	-	a				1 Jan 19
	ь	Less cost of goods s		b			100	
	c	Net income or (loss) f						
		Miscellaneous F		Business Code				
	11a	RETURNED CONTRIB	UTIONS		5,450	5,450		
	b							
	C	A. 11			ļ			
	d	All other revenue .			 			
	12	Total. Add lines 11a- Total revenue. See ii			5,450			
	L~	. Juli 18 veriue. 366 II	non uctions	📂	355,854	l I	1	ł

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U S See Part IV, line 22	 	····		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members . Compensation of current officers, directors, trustees, and key employees .				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages . Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees).	•			
a	Management			-	
b	Legal				
d	Accounting . Lobbying				
e	Professional fundraising services. See Part IV, line 17	· · · · ·			
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel .				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22 23	Depreciation, depletion, and amortization Insurance		<u> </u>		
24	Other expenses Itemize expenses not covered	ALCHES AND A STATE OF THE STATE	la de la companya de		
24	above (List miscellaneous expenses in line 24f If			and the second second	S. Caller
	line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	POLITICAL EXPENDITURES	492,683	492,683		
b					
С					
d					
e	All add an arrange				
25 26	All other expenses Total functional expenses. Add lines 1 through 24f	492,683	492,683	0	0
26	Joint costs. Check here ► If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Part X	Balance Sheet	T ·		
_		(A) Beginning of year		(B) End of year
1	Cash—non-interest-bearing	223,373	1	86,544
2	Savings and temporary cash investments		2	
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	
5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	nor Va	n 🎉	Sept.
6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		o 👫 6	
7	Notes and loans receivable, net		7	
8	Inventories for sale or use		8	~
9 10a	Prepaid expenses and deferred charges . Land, buildings, and equipment. cost or other basis. Complete Part VI of Schedule D	70.4	9	Carlos Anno
b	Less accumulated depreciation . 10b		10c	
11	Investments—publicly traded securities		11	
12	Investments—other securities See Part IV, line 11		12	
13	Investments—program-related See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	223,373	16	86,54
17	Accounts payable and accrued expenses		17	
18	Grants payable		18	
19	Deferred revenue	-	19	
20	Tax-exempt bond liabilities		20	
	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
21 22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		*	
23	Secured mortgages and notes payable to unrelated third parties .	-	23	
24	Unsecured notes and loans payable to unrelated third parties .		24	
25	Other liabilities Complete Part X of Schedule D		25	
26	Total liabilities. Add lines 17 through 25	0	26	
g	Organizations that follow SFAS 117, check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets		27	
28	Temporarily restricted net assets .		28	
29	Permanently restricted net assets .		29	
27 28 29 30 31 32 33	Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.	Comment of the Commen		Andrew British
2 30	Capital stock or trust principal, or current funds		30	<u>_</u>
ភ្ជ 31	Paid-in or capital surplus, or land, building, or equipment fund .		31	
32	Retained earnings, endowment, accumulated income, or other funds	223,373	32	86,54
33	Total net assets or fund balances	223,373		86,54
34	Total liabilities and net assets/fund balances	223,373	34	86,54

Form	ggn	(201	n)

Page **12**

			3	,
Part	Reconciliation of Net Assets Check if Schedule O contains a response to any question in this Part XI	· · · · · · · · · · · · · · · · · · ·		
	oncorri concade o contamo a response to any question in this rare Ar	· ·	•	
1	Total revenue (must equal Part VIII, column (A), line 12)	1	355	,854
2	Total expenses (must equal Part IX, column (A), line 25)		492	,683
3	Revenue less expenses Subtract line 2 from line 1		(136,	829)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) .		223	,373
5	Other changes in net assets or fund balances (explain in Schedule O)			0
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33,			
	column (B))		86	5,544
Part				
	Check if Schedule O contains a response to any question in this Part XII			
			Yes	No
1	Accounting method used to prepare the Form 990.	77		70
	If the organization changed its method of accounting from a prior year or checked "Other," explain	īn 🕮	ł=	
	Schedule O.	2.5	*414	d.
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		✓
b	Were the organization's financial statements audited by an independent accountant?	2b		✓
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversign			
	of the audit, review, or compilation of its financial statements and selection of an independent accountant	[?] 2c		
	If the organization changed either its oversight process or selection process during the tax year, explain	ın 📜		l
	Schedule O.	et.ai		or yet
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year we	ere	2,000	er er er
	issued on a separate basis, consolidated basis, or both.	64	4	
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		67,55	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth	ın		
	the Single Audit Act and OMB Circular A-133?	3a		✓
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo t	I		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits			
		For	ո 990	(2010

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B
- · Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

• 5	Section 501(c)(4), (5), or (6) orga	inizations_Complete Part III		_	
Name	of organization		•	Employer ider	ntification number
WAU	OHIO STATE POLITICAL AC				31-0934581
Par	t I-A Complete if the	e organization is exempt und	ler section 501(d	c) or is a section 527 of	organization.
1 2 3	Provide a description of t Political expenditures Volunteer hours.	the organization's direct and indirect.	ect political campa	ugn activities in Part IV. ▶ \$	0 492 683
Par	t I-B Complete if the	e organization is exempt und	ler section 501(c	c)(3).	
1	Enter the amount of any of Enter the amount of any of the organization incurred was a correction made? If "Yes," describe in Part tI-C Complete if the Enter the amount directly activities Enter the amount of the f 527 exempt function activities Total exempt function expline 17b Did the filing organization of Enter the names, addresse organization made payment the amount of political control of the sentence of the sentence organization made payment the amount of political control of the sentence of the sen	excise tax incurred by the organization excise tax incurred by organization ed a section 4955 tax, did it file Followski tax incurred by organization is exempt uncompared by the filing organization or	ation under section n managers under nrm 4720 for this year ler section 501(a ration for section buted to other org Enter here and higher (EIN) of all section mptly and directly	n 4955 . Section 501 . Section 501 . Section 527 political organizations from the filing organic delivered to a separate p	Yes No Yes No Yes No (c)(3). Yes No zations to which the filing zation's funds Also enter olitical organization, such
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-
(1)					
(2)					
(3)			-		
(4)			-		
(5)					
(6)			<u> </u>		

-

P	art IÌ-	Complete if the organization section 501(h)).	n is exempt ı	under section 5	01(c)(3) and file	d Form 5768 (ele	ction under
A	Chec	ck ▶ ☐ if the filing organization be	ongs to an at	filiated group.			
В	Chec	ck 🕨 🗌 if the filing organization ch	ecked box A	and "limited con	trol" provisions	apply	
		Limits on Lobb				(a) Filing	(b) Affiliated
		(The term "expenditures" me	eans amounts	paid or incurred.)	organization's totals	group totals
	1a To	otal lobbying expenditures to influence	public opinion	(grass roots lobby	ring)		
	b To	otal lobbying expenditures to influence	a legislative bo	ody (direct lobbyin	g) .		
	c To	otal lobbying expenditures (add lines 1	a and 1b)				
	d 0	ther exempt purpose expenditures .					
	e To	otal exempt purpose expenditures (add	l lines 1c and 1	d) .			
		obbying nontaxable amount Enter olumns	the amount f	rom the following	g table in both		
	lf:	the amount on line 1e, column (a) or (b) is:	The lobbying	nontaxable amoun	t is:		A STATE OF THE STATE OF
		ot over \$500,000		mount on line 1e			u (6) 18 1
	0	ver \$500,000 but not over \$1,000,000	\$100,000 plus	s 15% of the excess	over \$500,000		a de la companya de l
	0	ver \$1,000,000 but not over \$1,500,000	\$175,000 plus	10% of the excess	over \$1,000,000		
	O	ver \$1,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess o	ver \$1,500,000.		
	0	ver \$17,000,000	\$1,000,000			44.00	Later and the second
	g G	rassroots nontaxable amount (enter 25	% of line 1f)		•		
	h S	ubtract line 1g from line 1a If zero or le	ss, enter -0-				
	i Ş	ubtract line 1f from line 1c If zero or le	ss, enter -0-				
		there is an amount other than zero		1h or line 1i, did	the organization	file Form 4720	☐ Yes ☐ No
		porting section 4911 tax for this year?	· · · · · · · · · · · · · · · · · · ·			<u> </u>	
		(Some organizations that ma	de a section 5	Period Under Sec 501(h) election do ctions for lines 2a	not have to com	plete all of the five age 4.)	•
		Lobbying Lobbying	Expenditures	During 4-Year A	veraging Period	Т	
		Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
	2a Lo	obbying nontaxable amount					
		obbying ceiling amount 50% of line 2a, column (e))					
	(1						
_	(1 c To	50% of line 2a, column (e)) otal lobbying expenditures rassroots nontaxable amount					
	(1 c To d G e G	50% of line 2a, column (e)) otal lobbying expenditures					
_	(1 c To d G e G (1	50% of line 2a, column (e)) otal lobbying expenditures rassroots nontaxable amount rassroots ceiling amount					

Part	I-B Complete if the organization is exempt under section 501(c)(3) and has NOT fil (election under section 501(h)).	led F	orm	5768		
	(election under session es (i.i.j).	(a)		(b)	
	[Yes	No	Aı	nount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
С	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Railies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .					<u> </u>
i	Other activities? If "Yes," describe in Part IV	refresion art (1)	e englis e englis			
j	Total. Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? .		(v - 100 pr	***		
b	If "Yes," enter the amount of any tax incurred under section 4912					
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(501(c)(6).	(5), c	or se	ction		
	301(0)(0).				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members? .			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	•		2	\vdash	
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3	\vdash	_
Part	Complete if the organization is exempt under section 501(c)(4), section 501(c)(501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines "Yes."	(5), c ne 3	or se is ar	ction nswer	ed	
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	of				
а	Current year	- 1	2a			
b	Carryover from last year	Ī	2b			
С	Total	Ì	2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of t excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbyi and political expenditure next year?	he ng				
5	Taxable amount of lobbying and political expenditures (see instructions)		4			
	V. Supplemental Information	-	5	L		
Comp	lete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5; at ete this part for any additional information.	nd P	art II-	B, line	1ı Als	 SO,
SCHE	DULE C, PART 1-A, LINE 1. CONTRIBUTIONS TO POLITICAL ENTITIES					
			· · · · · · · · ·			
						

	rm 990 or 990-EZ) 2010	Page 4
Part IV	Supplemental Information (continued)	

	·	

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information

▶ Attach to Form 990 or 990-EZ.

Open to Public Inspection

Employer identification number

UAW OHIO STATE POLITICAL ACTION	31-0934581
PART VI, SECTION B, LINE 11 THE FORM 990 IS REVIEWED BY COUNSEL AND/OR THE TREAS	URER OF THE ORGANIZATION PRIOR TO
TRANSMITTAL TO THE IRS	
PART VI, SECTION C. LINE 19 THE ORGANIZATION MAKES DOCUMENTS AVAILABLE UPON RE	EQUEST IN ADDITION, THE ORGANIZATION
FILES REGULAR CAMPAIGN FINANCE REPORTS WITH THE OHIO SECRETARY OF STATE DETA	AILING ALL CONTRIBUTIONS AND
EXPENDITURES THESE REPORTS ARE CONTINUOUSLY AVAILABLE VIA THE SECRETARY OF	STATE'S WEBSITE AND AS A PUBLIC
RECORD	
	-
······································	
· ···· · · ···········	
······	
······································	
······································	